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## \*BIBDATASHEET\*

CONFIRMATION NO. 4823

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/757,059	<b>FILING OR 371(c) DATE</b> 01/14/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1621	<b>ATTORNEY DOCKET NO.</b> 0701.026F
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## APPLICANTS

Nancy M. Gray, Marlborough, MA

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 10/256,518 09/26/2002 ABN  
 which is a CON of 09/783,683 02/14/2001 ABN  
 which is a CON of 09/268,388 03/15/1999 ABN  
 which is a CON of 08/772,944 12/23/1996 PAT 5,888,535 \*  
 which is a CON of 08/416,442 04/03/1995 ABN  
 which is a CON of 08/054,318 04/27/1993 ABN  
 (\*)Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 04/15/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

2264

## TITLE

METHOD FOR TREATING GASTRIC DISORDERS USING OPTICALLY PURE (-) PANTOPRAZOLE

<b>FILING FEE RECEIVED</b> 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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